U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

AU6222005

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FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only

1. File Number U - 70.751 Z

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

e e	7 / 20e7 Through: 12 / 37 / 20e9
3. Name and address of person filing.	Name, file number, and address of labor organization.
Name Joseph C Edward	Name Brotherhood of Legentie Raging
	Labor Organization File Number
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 570 E. Begelstons 1/2	Street 570 E Repr. D. J. J. J.
City Virgin A	City Vizginia
State 74 62691	State I ZIP Code + 4 6269
5. Position in labor organization.	
Enter appropriate data below If, during the past fiscal year, you or your spo (except as specified in the exclu	use or minor child directly or indirectly had any of the following interests sions set forth in the instructions):
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization.	derived income or other economic benefit of on represents or is actively seeking to represent.
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name Landston and	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	7.b. Amount.
City City	
State ZIP Code + 4	
Sign	ature
15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany undersigned's knowledge and belief, true, correct, and complete. (See the se	ing documents), has been examined by the signatory and is, to the best of the
Signed Just Plan	On 8-13-05 217-952-3273 Date Telephone Number
Form LM-30 (2003)	Page 1 of 2

Name of Person Filing	File Number U-
B. Held an interest in or derived income or economic benefit with monetary val substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	vise dealing with the business vely seeking to represent, or irectly to, or otherwise
8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name	
Trade Name, if any:	a. Labor Organization b. Trust
P.O. Box, Bldg., Room No., if any	c. Employer
Street	
City	
State ZIP Code + 4	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name 135	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	11.b. Approximate dollar value of such dealing.
City	Nature of interest held or income received.
State ZiP Code + 4	
	12.b. Amount.
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value.
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.
(including trade name, if any). Name See A-Hackant	See Affactment
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	Open and a second
State ZIP Code + 4	
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment. See AHO chart

		e.				
	•	c	Schlichter, Bogard & Denton 100 S 4 th Street., Suite 900 St. Louis, MO 63102	Rose, Sanders & Bovarnick, L.L.P. 1205 N.W. 25 th Ave. Portland, OR 97210	Hunegs, Stone, LeNeave, Kvas & Thornton 900 Second Ave. South, Suite 1650 Minneapolis, MN 55402	13a.Name and Address of Employer/Labor Relations Consultant
			Employer	, 1	Employer	13b.Business is an employer/Consultant
2		, !	11/14/2004 football tickets		7/1/04-Supper Banquet in conjunction with Union function, multiple sponsors (continued)	14a.Nature of Payment
			In excess of \$25,00		In excess of \$25.00	14b. Amount of Payment

Attachment "A"

Form LM-30 (Labor Organization Officer and Employee Report)
Fiscal Year: 01/01/2004 thru 12/31/2004

Reporting Labor Organization: Brotherhood of Locomotive Engineers and Trainmen (BLET-BNSF/MRL GCA)

Labor Organization Officer: 5-digit OLMS File Number: Organization File Number:

Joseph C Edwards (Local Chairman)
None available at this time
2004LM-30

12/31/2004

Ending Date of Reporting Period:

report.	*The p
report. The information shown below reflects the best good-faith estimate of value and occasion based upon personal recollection.	*The purpose of this Attachment "A" is to furnish additional itemized information pertaining to Part C (Items 13 thru 14) of the Form LM-30

13a Name and Address of 13h Business is an 14a Nat	13h Business is an	14a Nature of Payment	14b. Amount of Payment
Employer/Labor Relations	employer/Consultant		
Consultant			
Rathmann, and O'Brien, L.L.C. 1031 Lami Street St. Louis, MO 63104	Employer	7/1/04-Supper Banquet in conjunction with Union function, multiple sponsors	In excess of \$25.00
Yaeger, Jungbauer, Barczak & Vucinovich, PLC. 745 Kasota Ave. Minneapolis, MN 55414			
Ingebritson & Associates, P.A. 100 South Fifth Street, Suite 450 Minneapolis, MN 55402			
Jones & Granger 10000 Memorial Drive, Suite 888 Houston, TX 77210			
Schlichter, Bogard & Denton 100 S. 4 th St., Suite 900 St. Louis, MO 63102			

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\$160.00	11/14/2004 football tickets	Employer	Schlichter, Bogard & Denton 100 S 4 th Street., Suite 900 St. Louis, MO 63102
			Rose, Sanders & Bovarnick, L.L.P. 1205 N.W. 25 th Ave. Portland, OR 97210
In excess of \$25.00	7/1/04-Supper Banquet in conjunction with Union function, multiple sponsors (continued)	Employer	Hunegs, Stone, LeNeave, Kvas & Thornton 900 Second Ave. South, Suite 1650 Minneapolis, MN 55402
14b. Amount of Payment	14a.Nature of Payment	13b.Business is an employer/Consultant	13a.Name and Address of Employer/Labor Relations Consultant